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Item 6 (a) of the provisional agenda*

Country programme document

Ethiopia

Summary

The country programme document (CPD) for Ethiopia is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$143,105,039 from regular resources, subject to the availability of funds, and \$306,844,961 in other resources, subject to the availability of specific-purpose contributions, for the period July 2016 to June 2020.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the first regular session of 2016.

* E/ICEF/2016/1.

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Programme rationale

1. The Ethiopian economy is showing impressive growth. The country's gross domestic product increased by 10.3 per cent in 2014;¹ similar rates of growth are anticipated for 2015 and the Government of Ethiopia aspires to transition to middle-income status by 2025. While there has been significant progress in reducing poverty – with rates falling from 39 per cent in 2004/5 to 26 per cent in 2012/13 – the rate of decline in rural poverty lags behind that of urban poverty. The overarching goal of this country programme is to reduce child poverty and its effects, with a focus on those most in need.
2. Ethiopia has a population of approximately 99 million people, of whom 48 per cent are under the age of 18.² With the ongoing demographic transition, it is particularly important to support adolescents to develop skills to lead healthy and productive lives and contribute to building prosperous, safe and peaceful communities.
3. Ethiopia achieved Millennium Development Goal 4 – to reduce the under-five mortality rate – and is on track to reach Goal 6 on combating HIV, malaria and other major diseases. With a maternal mortality ratio of 420 deaths per 100,000 live births against a target of 267 per 100,000 live births, Goal 5 was not met.³ At the same time, there has been considerable progress: the proportion of women receiving skilled assistance during delivery increased from 9 per cent to 16 per cent between 2011 and 2014.⁴
4. Ethiopia is on track to reach Millennium Development Goal 1 – eradicating extreme poverty and hunger. While rates of stunting continue to be high, stunting prevalence decreased from 58 per cent in 2000 to 40 per cent in 2014. Prevalence is higher in rural areas (42 per cent) than in urban areas (27 per cent). While 98 per cent of children are breastfed, only 52 per cent are exclusively breastfed in the first six months of life and only 4 per cent of children aged 6–23 months receive a minimum acceptable diet.⁵
5. The country has also achieved the portion of Goal 7 (Target 7C) related to water, but not sanitation. Approximately 53 per cent of households have access to improved water sources⁶, with coverage higher in urban areas (92 per cent) compared with rural areas (45 per cent). Access to improved sanitation is 24 per cent.⁷ Community-Led Total Sanitation and hygiene interventions have reduced the rate of open defecation from 92 per cent in 1990 to 29 per cent in 2015.
6. The pre-primary gross enrolment rate is only 34 per cent.⁸ Most preschools are located in urban areas and access is limited to children whose parents can afford to pay fees. A recent Government initiative enables more children to benefit from school-readiness programmes through '0' grades attached to primary schools.
7. Net primary school enrolment is 93 per cent: boys 95 per cent; girls 90 per cent. There are marked regional disparities in access to education: enrolment rates in the Afar and Somali regions are below 60 per cent. Challenges associated with the low quality of basic

¹ Geiger, M.T. and L. C. Moller, 4th Ethiopia Economic Update, World Bank, 8 July 2015.

² Central Statistical Agency (CSA) of Ethiopia, 2015.

³ 2013 United Nations estimate, published in Trends in Maternal Mortality: 1990-2013, WHO, 2014.

⁴ CSA of Ethiopia, 2012, Ethiopia Demographic and Health Survey 2011.

⁵ CSA of Ethiopia, 2012, Ethiopia Demographic and Health Survey 2011.

⁶ CSA of Ethiopia, 2012, Ethiopia Demographic and Health Survey 2011.

⁷ WHO/UNICEF Joint Monitoring Programme for Water and Sanitation, 2015.

⁸ Ministry of Education, Ethiopia, Education Statistics Annual Abstract 2005 (2012/2013).

education are demonstrated by the low survival rate to grade 5, which is 56 per cent. Only 47 per cent of girls and boys complete the full eight grades of primary school.⁹ According to Government estimates, approximately 2 million children of primary school age, including 1.12 million girls, are out of school.¹⁰ A high percentage (57.1 per cent) of students in the lower primary education cycle are not achieving the basic learning outcomes considered essential to succeed in their subsequent education and employment trajectory.¹¹

8. Only 8 per cent of females and 11 per cent of males over age 15 have any secondary education.¹² In addition to traditional gender norms and a high burden of domestic work for girls, the distance to secondary schools is a key bottleneck limiting participation.

9. Birth registration is a critical first step in ensuring the legal protection of children. In 2014, only 7 per cent of births were registered.¹³ A comprehensive legislative framework has now been established to accelerate birth registration.

10. Globally, Ethiopia has the second highest number of girls and women who have undergone female genital mutilation/cutting (FGM/C). Prevalence is declining but remains high, especially in rural areas. An estimated 23 per cent of girls under age 15 have undergone FGM/C.¹⁴

11. Ethiopia is at high risk of climate-related shocks, including droughts and disease outbreaks. Over 80 per cent of the population resides in rural areas and is dependent on rain-fed agriculture. Despite strong economic growth, more than 30 million Ethiopians live below the food poverty line. High poverty levels and an overreliance on subsistence agriculture and pastoralism mean shocks often translate into extended humanitarian situations that affect large parts of the country.

12. With an additional 250,000 refugees finding shelter in Ethiopia in 2014 as a result of political instability in neighbouring South Sudan, Ethiopia currently hosts nearly 730,000 refugees originating from Eritrea, Somalia and South Sudan.¹⁵

13. Major lessons from the previous country programme have informed the design of the new programme. UNICEF is increasingly recognizing the value of resilience in helping to bridge the humanitarian and development divide and respond to the country's longer-term development programming challenges.

Cross-sectoral issues

14. **Integrated early childhood development (IECD).** Many families are unaware of the significance of early childhood care and education for a child's development, including the effects of appropriate nutrition, play and family care in an environment safe from violence.

⁹ Federal Democratic Republic of Ethiopia Ministry of Education: Education Statistics Annual Abstract 2006 E.C (2013/14 G.C).

¹⁰ Based on UNICEF Ethiopia calculations using Education Management Information System and CSA of Ethiopia data.

¹¹ Ethiopian Fourth National Learning Assessment of Grades 4 and 8 Pupils, Data Analytic Report, FDR Ministry of Education, January 2013.

¹² CSA of Ethiopia, Mini Demographic and Health Survey 2014.

¹³ UNICEF, *The State of the World's Children 2015*.

¹⁴ Welfare Monitoring Survey 2011, cited in the National Harmful Traditional Practices Strategy.

¹⁵ UNHCR, Ethiopia Fact Sheet August 2015, <www.unhcr.org/524d82ce9.html>, accessed on 10 August 2015.

15. **Adolescents**, who are defined as persons between ages 10 and 19, constitute 26 per cent of the total population. Life choices for adolescent girls are limited by social norms and practices that include child marriage, FGM/C, limited support for girls' education and gender-based violence. An estimated 8 per cent of girls are married by age 15¹⁶ and 17 per cent of females aged 15–19 are married.¹⁷

16. **Resilience**. Despite strong economic growth, more than 30 million Ethiopians live below the food poverty line. High poverty levels and overreliance on rain-fed subsistence agriculture and pastoralism mean shocks often result in humanitarian situations that affect large parts of the country.

17. **Urban programming**. Approximately 20 per cent of the population is considered urban. While urban areas have better development indicators, there are large disparities across wealth quintiles. Children living in urban areas are at higher risk of HIV than those living in rural areas, and social protection needs are pressing.

Programme priorities and partnerships

18. The UNICEF country programme supports the Ethiopian Government's second Growth and Transformation Plan and contributes to the four pillars of the United Nations Development Assistance Framework (UNDAF) 2016–2020: disaster risk management, social protection and climate-resilient green economy; basic social services; governance, participation and capacity development; and equality and empowerment.

19. The following strategies will be used to achieve the results of the country programme:

- (a) evidence-based advocacy and technical assistance to promote rights-based and equity-focused policies, laws and budgets for children;
- (b) capacity development to strengthen national institutions and systems;
- (c) evidence-based communication for social and behavioural change;
- (d) strengthening national capacity in monitoring, evaluation and evidence-based planning;
- (e) innovation to increase the effectiveness and efficiency of programmes;
- (f) strategic partnerships for children;
- (g) promotion of child and youth participation in decision-making processes; and
- (h) South–South and triangular cooperation.

20. The country programme mainstreams risk-informed emergency preparedness and response across all programmes, in line with the Core Commitments for Children in Humanitarian Action.

21. The country programme will be implemented nationally, focusing on the developing regional states (Afar, Benishangul-Gumuz, Gambella and Somali) and other marginalized areas or population groups. The programme has seven components: health; nutrition; water, sanitation and hygiene (WASH); learning and development; child protection; social policy

¹⁶ CSA of Ethiopia, Ethiopia Demographic and Health Survey 2011.

¹⁷ CSA of Ethiopia, Ethiopia Mini Demographic and Health Survey 2014.

and evidence for social inclusion; and programme effectiveness. All programmes will include knowledge generation and management and advocacy for sustainable financing.

Health

22. This component contributes to the national Health Sector Transformation Plan and works to achieve the following outcome: *By 2020, equitable and affordable coverage of quality health interventions for newborns, children, adolescent girls and women [is] improved across the continuum of care at community and primary healthcare levels.* Interventions include: (a) expanding delivery of a comprehensive package of health services at community and health facility levels, with a particular focus on unreached areas and vulnerable populations; (b) improving quality and standards of health services; and (c) strengthening national systems, including at the community level, and preparing the health system for the country's transition to middle-income status and increased self-reliance in service delivery. The Health Extension Programme will be further strengthened to address the population's evolving needs, including in pastoralist and urban areas. Outreach health services will be facilitated for the most disadvantaged children living in urban settings.

Nutrition

23. The nutrition programme is designed to achieve the following outcome: *By 2020, an increased percentage of under-five girls and boys, adolescent girls and pregnant and lactating women are appropriately nourished and cared for.* The programme supports multisectoral, lifecycle approaches to reduce stunting and wasting through community-based interventions. The primary focus is pregnant and lactating women, under-five children and adolescent girls. In chronically vulnerable areas, resilience and livelihood interventions will be strengthened. The programme includes promotion of exclusive breastfeeding for the first six months, improving the quality of complementary feeding for children aged 6–23 months, accelerating adolescent nutrition programme implementation, and strategy development to address wasting and overweight in urban areas. Nutrition services will be integrated with other services, including WASH, health, education, child protection and social protection.

Water, sanitation and hygiene

24. UNICEF will support the WASH component of the second Growth and Transformation Plan and work to achieve the following outcome: *By 2020, the Ethiopian population, in particular women, children, adolescent girls and vulnerable groups, use affordable, safe, reliable, sustainable and adequate water supply, sanitation and appropriate hygiene practices in households, communities and institutions in rural and urban areas.* The programme will: (a) advance sanitation and hygiene promotion (including menstrual hygiene and BABY-WASH) in zones with a high prevalence of stunting, diarrhoea and trachoma; (b) leverage resources from the ONE WASH pooled fund to accelerate institutional WASH coverage; (c) innovate to improve the functionality and resilience of water supply in water-insecure *woredas* (districts); (d) intensify urban sanitation and pro-poor water service delivery; and (e) strengthen sector coordination for development and emergency programming.

Learning and development

25. This component aligns with the Government's Education Sector Development Plan 2015–2020 goal to work towards the following outcome: *By 2020, equitable access created and quality education and training provided to all learners at pre-primary and primary level and girls' access to secondary education increased, with a focus on the most disadvantaged and vulnerable children, populations and localities.* The programme will focus on improving access to and the quality of educational services for children and vulnerable communities in less developed areas. Key interventions will include: extending early learning and school readiness programmes; enhancing student learning outcomes through the implementation of relevant school improvement initiatives, strong sector planning and policy dialogue; and broadening access for out-of-school children, with a focus on adolescent girls, children from pastoralist communities and children in emergency contexts.

Child protection

26. This component focuses on enhancing the policy environment and strengthening systems so that *by 2020, an increased number of children and adolescents susceptible to violence, exploitation and abuse, in emergency and non-emergency settings, benefit from quality, gender-sensitive, community-based and formal child protection and response services.* In line with Government commitment to end child marriage and FGM/C by 2025, as well to realize adolescents' sexual and reproductive health and rights, social norms will be addressed through interventions targeting community and religious leaders. Capacities of adolescent boys and girls will be reinforced through life skills training, provision of information to support access to youth-friendly HIV prevention and treatment services and recruiting adolescents to act as agents of change. Systems providing gender-sensitive responses to violence, abuse and exploitation of children and adolescents will be strengthened. The programme will promote expansion of birth registration, support the Government to develop a social welfare workforce and strengthen case management, and improve data collection and analysis to buttress the country's social welfare and child justice services, including in emergencies. Advocacy will focus on increased allocation of national resources and on scaling up high-impact interventions.

Social policy and evidence for social inclusion

27. The target outcome of this programme component follows: *By 2020, Ethiopian children benefit from an improved policy environment, and evidence-informed, child-friendly, gender-sensitive and results-oriented planning and financing in support of the inclusive, sustainable and equitable realization of child rights.* The programme supports national goals of good governance, social protection policy implementation, participation and capacity development to empower communities to take charge of their own development. This component will contribute to strengthening Government capacity in child-sensitive social protection systems. It will facilitate evidence generation and utilization for informed decision-making and policy dialogue at national and subnational level that promote the rights of boys, girls and women. UNICEF will engage in public finance management to leverage domestic resources for equitable realization of the rights of children and women through participatory planning and budgeting, inclusiveness, accountability and transparency in decision-making and equitable public service delivery.

Programme effectiveness

28. The goal of this component is *effective, efficient and evidence- and risk-based management and coordination of resources, technical leadership, advocacy and support for planning, implementing and monitoring the country programme and UNICEF contribution to UNDAF and the Sustainable Development Goals*. Programme effectiveness covers the following areas: disaster risk reduction and resilience; communication and advocacy; communication for development; coordination, planning and monitoring; and cross-cutting outcomes.

Disaster risk reduction and resilience

29. UNICEF, in coordination with other United Nations agencies, will pursue a three-pronged strategy to support the implementation of the national Disaster Risk Management policy and Strategy Programme and Investment Framework at federal and regional levels and (a) develop and strengthen national and subnational systems to prepare for, respond to and recover from emergencies; (b) build community capacity for conflict-sensitive preparedness and response; and (c) develop and maintain sustainable infrastructure and delivery systems for basic social services in disaster-prone areas and regions affected by the refugee influx.

Communication and advocacy

30. UNICEF will work to place the rights and well-being of children, especially the most disadvantaged, at the heart of social, political and economic agendas, working multisectorally with partners, the Government, private sector, communities and individuals to support changes in public policy, fuel social engagement and increase private and public resources for children.

Communication for development

31. Communication for development (C4D) approaches will support the goals of all programme components. The aim will be to strengthen engagement with individuals, communities, service providers and key influencers at all levels to promote behaviour change, overcome harmful traditional practices and norms, and strengthen ownership of community development processes. Strategies will tap into education platforms, religious networks, community mobilization structures and local and national media to drive behaviour and social change and increase demand for services. Innovative approaches will be used to reach pastoralist communities and other key populations.

Coordination, planning and monitoring

32. This component will ensure that coordination, planning and monitoring functions of the country office are implemented in line with UNICEF policies and procedures, the UNICEF Strategic Plan, the UNDAF and the Government's Programme Implementation Manual. Programme monitoring will be conducted in accordance with the UNDAF Monitoring and Evaluation Framework.

Cross-cutting outcomes

33. The country programme includes two strategic cross-cutting outcomes: integrated early childhood development; and adolescent girls. Both outcomes contribute to the delivery of results in the six sectoral programme components.

A. Integrated early childhood development

34. This multisectoral programme will create an enabling environment that supports early stimulation and positive parenting for children aged 0–3 years to achieve the following outcome: *By 2020, children aged 0–3 receive adequate nurture and stimulation as a result of implementation of models of integrated, sustainable and quality early child development interventions that include health, nutrition, protection, early stimulation, school readiness and WASH.* The programme will generate evidence on effective early stimulation and nurturing practices and develop advocacy tools to publicize the benefits. Context-specific guidelines and key messages will be developed for the Health Extension Programme, Productive Safety Net Programme, health development army and maternity waiting homes. The prevention of violence, abuse and neglect of children under age 3 will be supported through communication for behaviour change.

B. Adolescent girls

35. This multisectoral programme will aim to achieve the following outcome: *By 2020, key barriers to girls' empowerment have been removed and adolescent girls live in supportive communities and utilize quality services and information that protect them from child marriage and FGM/C.* The programme will generate evidence and advocacy tools on the benefits of investing in girls and will strengthen coordination across sectors for evidence-based programmes that contribute to girls' empowerment. Interventions will address discriminatory gender norms, improve girls' completion of primary education and transition to secondary school, protect girls from violence and harmful traditional practices, increase girls' access to and utilization of adolescent-responsive health and HIV prevention services, and equip girls to reduce their vulnerability to adolescent pregnancies. Three priority geographic areas have been identified: the Afar, Amhara and Somali regions, plus selected *woredas* in other regions.

36. In coordination with the Government, UNICEF will work with partners, including: United Nations agencies; bilateral and multilateral development partners; international and national non-governmental organizations (NGOs); faith-based and civil society organizations; the private sector; and the media and other communication forums for raising awareness on child rights. Engagement with global partnerships and initiatives will continue, including: *Committing to Child Survival: A Promise Renewed*; the Scaling Up Nutrition movement; Renewed Efforts Against Child Hunger; the Global Partnership for Education, GAVI, the Vaccine Alliance; the Global Fund to Fight AIDS, Tuberculosis and Malaria; and ONE WASH.

Summary budget table

Programme component	(In thousands of United States dollars)		
	Regular resources	Other resources	Total
Health	26 210	109 955	136 165
Nutrition	14 305	68 159	82 464
Water, sanitation and hygiene	18 248	46 339	64 587
Learning and development	20 172	32 852	53 024
Child protection	26 162	17 796	43 958
Social policy and evidence for social inclusion	14 503	4 577	19 080
Programme effectiveness	23 505	27 167 ^a	50 672
Total	143 105	306 845^b	449 950

a. Amount to be agreed for each contribution depending on the donor.

b. This amount excludes \$156,000,000 in other resources emergency funding projected for the humanitarian response during the programme cycle.

Programme and risk management

37. This country programme document outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at country level. Accountabilities of managers at the country, regional and headquarter levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

38. This country programme builds on more than 60 years of partnership and effective programmes of cooperation with the Government of Ethiopia. The programme is aligned with national development priorities and sectoral plans and programmes.

39. The Ministry of Finance and Economic Development (MoFED) and relevant line ministries, as well as NGOs, are key partners in planning and management at federal and subnational levels, ensuring full alignment with national priorities and facilitating identification of challenges and opportunities. Regular joint monitoring and reviews are key mechanisms by which risks to the country programme are identified and managed.

40. Management of the harmonized approach to cash transfers will be strengthened to mitigate and respond to major risks in programme implementation. Staff capacity will be enhanced to strengthen accountability for results. In line with the Government's decentralization approach, UNICEF zonal offices will engage with Government and NGO partners, share timely information on risks and opportunities and provide technical and management support to counterparts.

Monitoring and evaluation

41. Progress will be monitored using the indicators in the Results and Resources Framework (Annex), the UNDAF results matrix and the Integrated Monitoring and Evaluation Plan. Monitoring tools include: national management information systems and data, the Monitoring Results for Equity System (MoRES), joint mid-year and annual reviews, UNICEF and UNDAF mid-term reviews and cluster coordination monitoring mechanisms. Independent evaluations (see the Costed Evaluation Plan) will be co-managed with the Government, following United Nations evaluation norms and standards. The country office monitoring system ensures that findings from programme assurance activities contribute to effective and efficient programme management. UNICEF will work with other agencies to strengthen the capacity of national institutions to monitor progress towards national and international goals and to track inequities.

Annex

Results and resources framework

Ethiopia – UNICEF country programme of cooperation, July 2016–June 2020

Convention on the Rights of the Child: Articles 4, 6(2), 11, 13–22, 24–25, 28–29, 32–41. National priorities: Ethiopia Growth and Transformation Plan II 2015/16-2019/20 and Sector Development Plans: Health Sector Development Program; National Nutrition Plan; National Strategic Plan for HIV and AIDS, Sector Plan for WASH; Education Sector Development Program V; National Social Protection Policy and National Social Protection Strategy; National Policy on Ethiopian Women; Women Policy; Youth Policy; National Plan of Action for Orphans and Vulnerable Children. Sustainable Development Goals: 1, 2, 4, 5–6, 10–11 and 16.	UNDAF outcomes involving UNICEF: 2.1. Capacity of institutions in disaster-prone areas improved to respond to emergencies; 2.2. Government ensures increased access to a comprehensive package of social protection programmes/interventions/services to vulnerable populations; 2.3. Key Government institutions able to plan, implement and monitor climate change mitigation and adaptation actions. 3.1. Ethiopian population – in particular, vulnerable groups – have improved access to, and utilization of, quality and equitable health services; 3.2. Percent of children under 5, adolescents and women appropriately fed and cared for increased. 3.3. Targeted population groups have improved access to and use quality HIV prevention, treatment, care and support services; 3.4. Ethiopian population – in particular, vulnerable groups – have access to and use affordable, safe and adequate water, sanitation and hygiene (WASH) services; 3.5. Equitable access created and quality education and training provided to all learners at pre-primary, primary and post-primary levels, with a focus on the most disadvantaged and vulnerable children, populations and localities. 4.1. Key Government institutions and other stakeholders apply enhanced capacities to ensure and benefit from the rule of law, an efficient and accountable justice system, and the promotion and protection of human rights in line with national and international instruments, standards and norms; 4.2. Key Government institutions and other stakeholders utilize enhanced capacities to ensure equitable, efficient, accountable, participatory and gender-responsive development; 4.3. National and subnational institutions apply evidence-based, result-oriented and equity-focused decision-making, policy formulation, programme design, monitoring, evaluation and reporting. 5.1. Women and girls are increasingly protected from violence, harmful traditional practices, exploitation, discrimination and are rehabilitated and reintegrated to enjoy their full human rights; 5.2. Women, adolescents and youth are empowered to influence decisions that concern their life and the development of the country. [Indicators are taken from UNDAF outcome indicators (see following matrix)].
	Related outcomes of the UNICEF Strategic Plan 2014–2017: The country programme will contribute to all seven outcomes Strategic Plan outcomes.

UNICEF outcomes	Key progress indicators, baselines and targets ^{1,2}	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
1. Health By 2020, equitable and affordable coverage of quality health interventions for newborns, children, adolescent girls and women improved across the continuum of care at community and primary healthcare levels.	Proportion of institutional deliveries <i>Baseline:</i> 16% <i>Target:</i> 90%	Ethiopia Demographic and Health Survey (EDHS) Mini EDHS Health Management Information System (HMIS)	1.1. National, regional and <i>woreda</i> capacity strengthened to develop evidence-based health strategies and costed plans to coordinate and mobilize resources, and monitor and evaluate progress towards universal health, focusing on the most disadvantaged areas.	Federal Ministry of Health (FMoH) Regional health bureaus (RHBs) Woreda health offices	26 210	109 955	136 165
	Proportion of children immunized with PENTA 3 <i>Baseline:</i> 66% <i>Target:</i> 95%	EDHS Expanded Programme Immunization (EPI) coverage survey HMIS	1.2. Primary healthcare system has capacity to provide quality package of essential maternal, newborn, child and adolescent health interventions at scale, focusing on underserved areas.	United Nations agencies International and local NGOs			
	Proportion of mothers and newborns receiving postnatal visit within 48 hours	EDHS Mini EDHS HMIS	1.3. Community health system platforms strengthened to support use of services and ensure sustained adoption of positive practices and social norms that affect the health of	Community-based organizations (CBOs) Faith-based			

¹ To the extent possible, all data will be disaggregated by gender, age, geographic location and socio-economic status.

² This annex presents only the key outcome indicators. A detailed results matrix with an expanded list of outcome and output indicators disaggregated by region, gender and wealth will be used for programme planning, monitoring and evaluation. This will be reflected in the country programme action plan and results assessment module. Alignment with the UNICEF Strategic Plan 2014-2017 and regional UNICEF indicators is clearly reflected in the detailed results matrix at the outcome and output level, as applicable.

	Baseline: 13% Target: 85%			organizations (FBOs) Academia	14 305	68 159	82 464
	Proportion of household out-of-pocket expenditure on health Baseline: 34% Target: 30%	National Health Accounts report	mothers, newborns, children and adolescents, particularly in the most disadvantaged areas. 1.4. National and subnational capacity to respond to health-related disaster risks strengthened.				
2. Nutrition By 2020, an increased percentage of under-five girls and boys, adolescent girls, and pregnant and lactating women are appropriately nourished and cared for.	Proportion of girls and boys aged 6–23 months who receive a minimum acceptable diet Baseline: 4.6% (girls); 3.6% (boys) Target: 10% (girls); 10% (boys)	EDHS	2.1. Multisectoral coordination and capacity of sectors engaged in National Nutrition Plan implementation strengthened with a focus on policy, information systems and knowledge management. 2.2. Percentage of pregnant women, caregivers of girls and boys under 2, and adolescent girls equipped with knowledge of optimal nutrition and caring behaviour increased.	All ministries implementing the National Nutrition Plan NGOs	14 305	68 159	82 464
	Number of severely malnourished children aged 0–59 months treated for severe acute malnutrition Baseline: 254,326 Target: 275,000 ³	National Nutrition Program Monitoring Tool	2.3. Quality nutrition services for pregnant women, caregivers of girls and boys under 5 and adolescent girls strengthened.				
	Proportion of infants under 6 months exclusively breastfed Baseline: 52%	EDHS	2.4. Government and partner capacities to respond to nutrition in humanitarian crises strengthened.				

³ The number of children affected by severe acute malnutrition rises due to increased humanitarian needs, better nutritional screening, and an increased number of services available. The number decreases if these factors are reversed, when stock-outs of nutrition supplies occur and when more comprehensive services that prevent children from becoming acutely malnourished become available.

	Target: 70%	Joint Monitoring Programme (JMP) WASH inventory Mini DHS	3.1. Strengthened capacity of WASH sector in evidence-based strategic planning, coordination, leveraging, advocacy and implementation of development and emergency interventions. 3.2. Enhanced institutional capacity in the provision of equitable and regulated water, liquid/solid waste management services in rural, urban and peri-urban areas. 3.3. Populations affected by WASH emergencies receive WASH services in line with minimum standards.	Ministry of Water, Irrigation and Energy FMoH Ministry of Education (MoE) Ministry of Urban Development Housing and Construction Water Resources Development Fund Regional WASH bureaus RHBs Regional Education bureaus (REBs) Regional urban development and	18 248	46 339	64 587
3. WASH By 2020, the Ethiopian population, in particular women, children, adolescent girls and vulnerable groups, use affordable, safe, reliable, sustainable and adequate water supply, sanitation and appropriate hygiene practices in households, communities and institutions in rural and urban areas.	Proportion of people using safely managed, adequate and resilient water supply services <i>Baseline:</i> 57% <i>Target:</i> 83% ⁴	Joint Monitoring Programme (JMP) WASH inventory Mini DHS	3.1. Strengthened capacity of WASH sector in evidence-based strategic planning, coordination, leveraging, advocacy and implementation of development and emergency interventions. 3.2. Enhanced institutional capacity in the provision of equitable and regulated water, liquid/solid waste management services in rural, urban and peri-urban areas. 3.3. Populations affected by WASH emergencies receive WASH services in line with minimum standards.	Ministry of Water, Irrigation and Energy FMoH Ministry of Education (MoE) Ministry of Urban Development Housing and Construction Water Resources Development Fund Regional WASH bureaus RHBs Regional Education bureaus (REBs) Regional urban development and	18 248	46 339	64 587
	Proportion of people using safely managed, adequate, equitable and resilient sanitation services <i>Baseline:</i> 28% <i>Target:</i> 50% ⁵	JMP					
	Number of people (particularly mothers) practising improved hygiene behaviours (hand-washing, face-washing, food hygiene) and living in healthy environments <i>Baseline:</i> 17% <i>Target:</i> 70%	JMP EDHS					
	Proportion of disaster-affected population saved and protected through timely and effective emergency WASH responses	Disaster Risk Management and Food Security Sector OCHA Annual Reports					

⁴ UNICEF is directly responsible for 1,850,000 new users (4.7% of the total).

⁵ UNICEF is directly responsible for 1,300,000 new users (1.9% of the total).

	Baseline: 95% Target: 100%			construction bureaus CSOs Private contractors, consultants and suppliers			
4. Learning and development By 2020, equitable access created and quality education and training provided to all learners at pre-primary and primary level and girls' access to secondary education increased, with a focus on the most disadvantaged and vulnerable children, populations and localities	Pre-primary gross enrolment ratio <i>Baseline:</i> 34% 33% (girls); 35% (boys) <i>Target:</i> 80% 80% (girls); 80% (boys)	Education Management Information System (EMIS) and survey Evaluation reports	4.1. Capacity of education system strengthened to meet Education Sector Development Plan V goal of equitable expansion of quality early childhood education services. 4.2. Equitable and inclusive access to primary and secondary school strengthened for out-of-school children. 4.3. Equitable and improved delivery of quality primary education. 4.4. Education system capacity in knowledge management strengthened. 4.5. Education sector capacity in provision of basic education in emergencies strengthened.	MoE REBs	20 172	32 852	53 024
	Primary and lower secondary net enrolment ratio <i>Baseline:</i> Primary – 93% 90% (girls); 95% (boys) Lower secondary – 21% 21% (girls); 20% (boys) <i>Target:</i> Primary – 98% 98% (girls); 98% (boys) Lower secondary – 47% 47% (girls); 47% (boys)						
	Gender parity index at primary and lower secondary level <i>Baseline:</i> Primary – 0.94 Lower secondary – 0.91						

	Target: Primary – 1 Lower secondary – 1						
	Proportion of Grade 4, Grade 8, and Grade 10 students who score 50% or above the composite scores by sex in National Learning Assessment ⁶ <i>Baseline:</i> Grade 4 – 43% (2012) Grade 8 – 44% (2012) Grade 10 – 23% (2014) <i>Target:</i> Grade 4 – 50% Grade 8 – 50% Grade 10 – 50%						
5. Child protection By 2020, an increased number of children and adolescents who are susceptible to violence, exploitation and abuse, in emergency and non-emergency settings, benefit from quality, gender-sensitive, community-based and formal child protection and response services.	Percentage of newborn children whose births are registered (annually) <i>Baseline:</i> 7% <i>Target:</i> 50%	Federal Vital Events Registration Agency Central Statistical Agency (CSA)	5.1. 150 <i>woredas</i> provide sustainable, comprehensive, child-focused social welfare services to vulnerable children and adolescents as part of an integrated social protection scheme. 5.2. 125 <i>woredas</i> provide comprehensive child- and adolescent-friendly justice services. 5.3. 50% of <i>woredas</i> provide civil registration services. 5.4. Capacities of institutions'	MoWCYA Ministry of Labour and Social Affairs (MoLSA) and respective regional offices Federal Supreme Court Regional Supreme	26 162	17 796	43 958
	Percentage of identified children accessing child-friendly social welfare services in five pilot regions <i>Baseline:</i> 10% <i>Target:</i> 40%	Ministry of Women, Children and Youth Affairs (MoWCYA) reports Baseline and endline survey					

⁶ Data for learning assessment are not currently disaggregated by gender. UNICEF has successfully advocated for gender disaggregation in future assessments.

	Proportion of reported child survivors of violence (including children in conflict with the law) who receive integrated legal and psychosocial support services in target <i>woredas</i> <i>Baseline:</i> Child survivors of violence: 0% Children in conflict with the law: 0% <i>Target:</i> Child survivors of violence: 80% Children in conflict with the law: 80%	Baseline and endline survey	and communities' strengthened to prevent and respond to violence against children and adolescent girls in 100 <i>woredas</i> and cities. 5.5. Institutional and community capacities to prevent the spread of HIV among adolescents strengthened in 120 'hotspot' urban <i>woredas</i> . 5.6. Coordination and accountability mechanisms, and community and institutional capacities for social mobilization to end child marriage and FGM/C strengthened at federal level, in three regions and other 'hotspot' <i>woredas</i> . 5.7. Child protection and gender-based violence services provided to children and adolescents affected by emergencies.	Court Federal and Regional Vital Events Registration Agency MoH and RHBs Ministry of Justice UNFPA UN-Women Disaster Risk Management and Food Security Sector UNHCR IOM			
6. Social policy and evidence for social inclusion By 2020, Ethiopian children benefit from an improved policy environment, and evidence-informed, child-friendly, gender-sensitive and results-oriented planning and	Number of national policies or strategies revised or adopted based on evidence produced with UNICEF support <i>Baseline:</i> 0 <i>Target:</i> 4	MoFED reports	6.1. Government institutional capacity for child-centred, equity-focused, evidence-based and inclusive national development policies and strategies enhanced. 6.2. Capacity of key Government institutions and other stakeholders to address child rights obligations	MoFED CSA National Planning Commission Ethiopian Development Research Institute MoWCYA	14 503	4 577	19 080
	Proportion of accepted country-specific CRC (2015) and CEDAW	MoWCYA annual report					

financing in support of the inclusive, sustainable and equitable realization of child rights.	(2014) recommendations implemented <i>Baseline:</i> CRC - 0% CEDAW - 0% <i>Target:</i> CRC - 70% CEDAW - 70%	CSA Multiple Overlapping Deprivation Analysis report	enhanced. 6.3. Institutional capacities for public finance management for children strengthened. 6.4. Government capacity to implement child-sensitive social protection strengthened. 6.5. Capacity of Government and other stakeholders for systems on gender equality commitments strengthened.	MoLSA		
	Percentage of children deprived in at least two dimensions <i>Baseline:</i> 90% <i>Target:</i> 80%	MoLSA annual report				
	Number of children benefiting from a Government social protection programme <i>Baseline:</i> 3.3-4.5 million <i>Target:</i> 6 million					
7. Integrated early childhood development (IECD) By 2020, children aged 0-3 receive adequate nurture and stimulation as a result of implementation of models of integrated, sustainable and quality early childhood development interventions that include health,	Refer to programme components					

nutrition, protection, early stimulation, school readiness and WASH.									
8. Adolescent girls By 2020, key barriers to girls' empowerment have been removed and adolescent girls live in supportive communities and utilize quality services and information that protect them from child marriage and FGM/C.	Refer to programme components								
9. Programme effectiveness Effective, efficient and evidence- and risk-based management and coordination of resources, technical leadership and advocacy.	Country programme rating on regional programme and operations indicators Proportion of programme 'on-track' Proportion of children in humanitarian situations reached with appropriate interventions Number of audit observations Number of recommendations closed in a timely manner	VISION/Insight Situation Reports Emergency Assessments Thematic Emergency Report Audit Action Report	9.1. Enhanced organizational capacity for efficient and effective planning and coordination. 9.2. Improved capacity for evidence-based learning and risk management. 9.3. Improved capacity for coordination of disaster management. 9.4. Enhanced advocacy and C4D capacity. 9.5. Strengthened stewardship and oversight of human, supply and financial resources.	MoFED and Bureaus NGOs CSOs Suppliers	23 505	27 167	50 672		

E/ICEFF/2016/P/L.2

Total resources			
	143 105	306 846	449 950